PTO/SB/81 (07-08) Approved for use through 12/31/2008. OMB 0651-0035

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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/785,672
	Filing Date	02/23/2004
	First Named Inventor	Michael P. Whitman
	Title	SURGICAL CUTTING AND STAPLING DEVICE
	Art Unit	3721
	Examiner Name	Gloria R. Weeks
	Attorney Docket Number	H-PM-00024 (1800-24)
A Power of Attorney is submitted herewith. A Power of Attorney is submitted herewith. A Power of Attorney is submitted herewith. OR I hereby appoint Practitioner(p) associated with the following Customer I hereby appoint Practitioner(p) or agent(p) to prosecute the application I hereby appoint practitioner(p) or agent(p) to prosecute the application and Trademark office connected therewith: OR I hereby appoint Practitioner(p) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: Practitioner(e) Name Registration Number Registration Number		
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OR
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203-492-5000

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Statement under 37 CFR 3.73(b) (Fprin PTO/SB/96) submitted herewith or filed on

SIGNATURE of Applicant or Assignee of Record

 Signature
 Date
 \$ / 9 / 1 (

 Name
 Thomas (Mushes)
 Telephone
 +1 (203) 492-5000

Title and Company Assistant Secretary

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one

"Total of _____ forms are submitted.
This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USET) or processes) an application. Confidentiality is povemed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete.

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